

# Form CPF M 102: Campaign Finance Report

**Municipal Form** 

TOWN CLEEK'S Office of Campaign and Political Finance

of Massachusetts 2018 MAR 30 AM 8: 39		File with: City or Town Clerk or Election Commis-
Fill in Reporting Period dates: Beginning Date:	01/01/2018	Ending Date: 03/30/2018
Type of Report: (Check one) → Check one) → Sth day preceding preliminary    8th day preceding e	lection 30 day a	after election year-end report dissolution
Joseph A. Curro, Jr.  Candidate Full Name (if applicable)  Arlington Board of Selectmen  Office Sought and District  21 Millett Street, Arlington MA 02474  Residential Address	Christine	Committee to Elect Joe Curro Committee Name  C Carney  Name of Committee Treasurer  Field Road, Arlington, MA 02474-2950  Committee Mailing Address
E-mail: jcurro@alumni.tufts.edu  Phone # (optional): 781-962-8562	E-mail:  Phone # (or	cccarney67@gmail.com
701-902-0302		
SUMMARY B	SALANCE INFOR	RMATION:
Line 1: Ending Balance from previous re	eport	947.14
Line 2: Total receipts this period (page 3	3, line 11)	8213.00
Line 3: Subtotal (line 1 plus line 2)		9160.14
Line 4: Total expenditures this period (p	page 5, line 14)	6779.03
Line 5: Ending Balance (line 3 minus lin	ne 4)	2381.11
Line 6: Total in-kind contributions this	period (page 6)	89.09
Line 7: Total (all) outstanding liabilities	s (page 7)	0
Line 8: Name of bank(s) used: Leader Ba	ank and PayPal	
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it activity, including all contributions, loans, receipts, expenditures, disburser finance activity of all persons acting under the authority or on behalf of this Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate  Candidate with Committee and no activity independent of the com  I certify that I have examined this report including attached schedules activity, of all persons acting under the authority or on behalf of this connection incurred any liabilities nor made any expenditures on my behalf during	e: (check I box only)  mittee and it is, to the best of my k ommittee in accordance with	and liabilities for this reporting period and represents the campaign with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date: 3-30-20.  (nowledge and belief, a true and complete statement of all campaign fi
Candidate without Committee OR Candidate with independent act I certify that I have examined this report including attached schedules finance activity, including contributions, loans, receipts, expenditures, campaign finance activity of all persons acting under the authority or or the contributions.	and it is, to the best of my k disbursements, in-kind con	cnowledge and belief, a true and complete statement of all campaign tributions and liabilities for this reporting period and represents the
	mof	(Candidate's signature) Date: March 30, 201

#### SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/04/2018	Bakey, Janice 15 Fountain Road Arlington MA 02476	75.00	
03/21/2018	Bilafer, Mary Ellen Cutter Hill Road Arlington, MA 02474	100.00	
03/20/2018	Blaszczynski, George 17 Washington Street Arlington MA 02474	100.00	
02/11/2018	Brazile, Juli 56 Coolidge Road Arlington MA 02476	100.00	
03/18/2018	Briggett, Marlissa 46 Peter Tufts Road Arlington MA 02474	200.00	Media South Coast Almanac
02/09/2018	Byrne, Michael 26 Upland Road Arlington MA 024174	100,00	
02/17/2018	Carney, Christine 98 Richfield Road Arlington, MA 02474-2950	500.00	Bookkeeper Carney General Contracting
03/04/2018	Costa, Barbara 20 Woodland Street Arlington, MA 02474	100.00	
01/21/2018	Curro, Joseph A. Jr. 21 Millett Road Arlington, MA 02474	250.00	
03/08/2018	Curro, Barbara 16 Highbank Trail Plymouth, MA 02360	100.00	
03/04/2018	Deyst, Mary 26 Upland Road West Arlington, MA 02474	200.00	Retired
03/04/2018	Dray, Elizabeth 130 Jason Street Arlington, MA 02476	100.00	
Line 9: Total Re	eceipts over \$50 (or listed above)		
Line 10: Total R	eceipts \$50 and under* (not listed above)		
Line 11: TOTA	L RECEIPTS IN THE PERIOD	See 894	← Enter on page 1, line 2

### SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
02/15/2018	Goldsipe, Mel 1273 Massachusetts Avenue Arlington MA 02476	250.00	Unemployed
02/27/2018	Haase, Camilla 88 Park Ave., Apt. 401 Arlington MA 02476	100.00	
02/25/2018	Howard, Jane 12 Woodland Street Arlington MA 02476	250.00	Retired
03/04/2018	Kalauskas, Charles 29 Kensington Park Arlington, MA 02476	100.00	
03/04/2018	LaCourt, Anne 48 Chatham Street Arlington, MA 02474	100,00	
03/09/2018	Lalicata, Guy 33 Ryder Street Arlington MA 02476	100.00	
03/04/2018	Michelman, Thomas 20 Everett 8t Arlington MA 02474	100.00	
03/04/2018	Morgan, Jane 172 Brattle Street Arlington ma 02474	100.00	
02/25/2018	Morrison, Garfield 14 Pawnee Drive Arlington., MA 02474	100.00	
02/25/2018	Paradis, Judith 143 Forest Street Arlington ma 02474	100.00	
03/01/2018	Peluso, Ted 438 Massachusetts Ave # 420 Arlington MA 02474	100.00	
03/28/2018	Popkin, Louise 9 Cliff Street Arlington ma 02476	100.00	
01/25/2018	Reedy, Allen 153 Renfrew Street Arlington, MA 02476	75.00	
Line 9: Total Re	ceipts over \$50 (or listed above)		
Line 10: Total Re	eceipts \$50 and under* (not listed above)		
Line 11: TOTAL	L RECEIPTS IN THE PERIOD	See P94	← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

## SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

report all receipts. Please include your committee name and a page number on each page.)

oort all receipts. Please include your committee name and a pa Name and Residential Address			Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
2/22/2018	Rehrig, Brian 28 Academy 87 Arlington ma 02476	100.00		
3/04/2018	Schwartz, Paulette 20 Robin Hood Road Arlington, MA 02474	100.00		
02/03/2018	Shea,Elaine 9 Lincoln Street Arlington MA 02476	1,000.00	Retired	
03/06/2018	Stamps, Susan 89 Grafton Street Arlington, MA 02474	200.00	Attorney Self-Employeed	
03/4/2018	Susse, Jennifer 45 Teel Street Arlington, MA 02474	100.00		
03/04/2018	Wiener, Laura 73 Jason Street Arlington MA 02476	100.00		
03/06/2018	Wilcox,David 55 Brantwood Road Arlington, MA 02476	150.00		
03/01/2018	Winstanely O'Connor, Mary 781 Concord Turnpike Arlington, MA 02476	200.00	Attorney Self-Employed	
03/28/2018	Zaccheo, Vesna & Scott 123 Washington Street Arlington MA 02474	100.00		
Line 9: Total R	eceipts over \$50 (or listed above)	5500.0	0	
	Leceipts \$50 and under* (not listed above)	2713.0		
Line 11: TOTAL RECEIPTS IN THE PERIOD		8213.0	Enter on page 1, line 2	

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
Date I alu	Artlounge Arlington	1346 Massachusetts Ave	Venue rental for Campaign		
3/04/2018		Arlington MA 02476	Kickoff event	200.00	
	Cambridge Offset Printing	56 Creighton Street Cambridge, MA 02140-2032	Campaign kickoff letter	1094.83	
02/22/2018		Cambridge, FIA 02140 2002		1074.03	
02/28/2018	Cambridget Offsett Printing		Promotional materials-Printing	576.94	
03/19/2018	Cambridge Offset Printing		Postcard and Mailing	2620.37	
	Cambridge Offset Printing		Pct. Postcards and mailing		
03/29/2018	Cambridge Offset Finding			2180.31	
		Line 12: Total Expenditures over \$50 (or listed above)		6672.4	
		Line 13: Total Expenditures	Line 13: Total Expenditures \$50 and under* (not listed above)		
	Enter on page 1, line 4	→ Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	6779.0	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
03/04/2018	Joan Axerlrod		Refreshments for Campaign Kick off	89.09
		Line 15: In-Kind Contributions over \$50 (or listed above)		89.09
		Line 16: In-Kind Contributions \$50 & under (not listed above)		0
		Line 17: TOTAL IN-KIND	CONTRIBUTIONS	89.09

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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